APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Typ ::

Regular

Subject Matter::

Utility

Title::

System and Methods for

Accelerating Data Delivery

Suggested Drawing Figure::

Total Drawing Sheets::

Informal: 4

Total: 4

Attorney Docket Number::

A-71880/RMA/JML 468914

Applicant Authority type::

Inventor One

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

John

Middle Name::

E.

Family Name::

Howe

City of Residence::

Saratoga

State or Province of Residence::

California

Country of Residence::

United States

Street of mailing address::

13590 Old Tree Way

City of mailing address::

Saratoga

State or Province of mailing address::

California

Postal or Zip Code of mailing

95070

address::

Applicant Authority type:: Inventor Two

Primary Citiz nship Country:: US

Status:: Full Capacity

Given Name:: Satish

Middle Name:: N.

Family Name:: Menon

City of Residence:: Mountain View

State or Province of Residence:: California

Country of Residence:: United States

Street of mailing address:: 2091 North Shoreline Boulevard

City of mailing address:: Mountain View

State or Province of mailing address:: California

Postal or Zip Code of mailing

address:: 94043

Applicant Authority type:: Inventor Three

Primary Citizenship Country:: India

Status:: Full Capacity

Given Name:: Jayakumar

Middle Name::

Family Name:: Muthukumarasamy

City of Residence:: Dublin

State or Province of Residence:: California

Country of Residence:: United States

Street of mailing address:: 5835 Southbridge Way

City of mailing address:: Dublin

State or Province of mailing address:: California

P stal or Zip Code f mailing 94568

addr ss::

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Applicant Authority type:: Inventor Four

Primary Citiz nship Country:: Venezuela

Status:: Full Capacity

Given Name:: Alberto

Middle Name::

Family Name:: Nova

City of Residence:: Burlingame

State or Province of Residence:: California

Country of Residence:: United States

Street of mailing address:: 116 Anita Road

City of mailing address:: Burlingame

State or Province of mailing address:: California

Postal or Zip Code of mailing 94010

address::

CORRESPONDENCE INFORMATION

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REPRESENTATIVE INFORMATION

Representative Customer Number: 32940

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DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional	60/426,507	11/14/2002

1124101_1